2000 UNIFORM BUSINESS REPORT (UBR)

						\$ 15x555127	C 4 12			
DOCUMENT # P9400051828 1. Entity Name					APPROVEÚ AND FILES					
CED CAPITAL HOLDINGS IV B, INC.					00 MAR 20 PM 3: 59					
Principal Place of Business Mailing Address										
1551 SANDSPUR RD. MAITLAND FL 32751		P O BOX 4961 ORLANDO FL 32802-4961			SECRETARY OF STATE TALLAHASSEE, FLORIDA					
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE	IN THIS S	PACE		
City & State		City & State		4.	FEI Number	59-3260838		_ 	plied For t Applicable	
Zip Country		Zip Country		5.	Certificate of	Status Desired		88.75 Add	litional	
	6. Name and Address of Current F	 Registered Agent		7.	Name and Ad	dress of New Reg			•	
			Name							
B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 N. ORANGE AVE.			Street A	Street Address (P.O. Box Number is Not Acceptable)						
SUITE 1100										
ORLANDO FL 32801			City	FL Zip Code						
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office or	r registered a	gent, or both, i	n the State of Florid	da.			
CLOSIATURE										
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signat	ure required when	reinstating)		DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		After MAY 1, 200	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta		I	on Campaign Finar Fund Contribution.	ncing		0 May Be to Fees	
11.	OFFICERS AND (DIRECTORS	12.	. ^	DDITIONS/CH	ANGES TO OFFIC	ERS AND	DIRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOS Delete SCIARRINO, MICHAEL J 1551 SANDSPUR RD. MAITLAND FL 32751		TITLE NAME STREET ADDRESS CITY-ST-ZIP		700003133567					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BROCK, JAY P 1551 SANDSPUR RD. MAITLAND FL 32751	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SCIARRINO, MICHAEL J 1551 SANDSPUR RD. MAITLAND FL 32751	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT GINSBI ISSI S MAITL	URG, HAI ANDSPUI AND, FC	eriet R poad 32751		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SHASSIAN, LOUIS P 1551 SANDSPUR RD. MAITLAND FL 32751	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GINSBERG, ALAN H 1551 SANDSPUR RD. MAITLAND FL 32751	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				\bigcap	□ Clange	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DOODY, TRICIA 1551 SANDSPUR RD. MAITLAND FL 32751	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			(N	hange	Addition	
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor or on an attachment with an address	true and accurate and that my vered to execute this report a	he exemption sta / signature shall h s required by Cha	ted in Section have the same apter 607, Flo	n 119.07(3)(i), f e legal effect as rida Statutes; a	Florida Statutes. I s if made under oa and that my name a	urther certi th; that I ar appears in	ly that the in m an officer Block 11 or	nformation or director Block 12 if	

SIGNATURE: ___

NAXURE AND THE OR PAINTED NAME OF SIGNING SEFICER OR PRECEDE PORS

3-17-00

407/741-8500

Daytine Phone #